

<b>Department of Health &amp; Welfare</b> <b>Bureau of Facility Standards</b> <b>Residential Care and Assisted Living Checklist</b>	Version Date: 5/06 Page 1 of 2  <b>Checklist #4</b>	
<b>Functional Area: Behavior Management</b>	Yes = In Compliance No = Further Action	
<b>Objective:</b> Ensure facilities develop and implement a written plan which decreases the frequency or intensity of maladaptive behaviors and increases the frequency of adaptive behaviors and introduces new skills. (The plan for Behavior Management is a part of the Negotiated Service Agreement.)		
<b>Specific Criteria</b>	<b>Yes</b>	<b>No</b>
<b>Policy and Procedure: IDAPA 16.03.22.153.06</b> 1. Does the facility have intervention procedures to guide staff to assure resident and staff safety in unsafe situations that are physically or behaviorally caused? {IDAPA 16.03.22.153.06}		
<b>Policy and Procedure: IDAPA 16.03.22.153.07</b> 1. Does the facility have policies and procedures that help you know how to do the following: a. Assess inappropriate behaviors in a timely manner? b. Create a plan for inappropriate behaviors? c. Develop interventions that address the inappropriate behaviors that are least restrictive? d. Document and evaluate the effectiveness of your interventions? {IDAPA 16.03.22.153.07}		
<b>Requirements: IDAPA 16.03.22.225</b> 1. Is the facility identifying and evaluating behaviors that are distressing to the resident or infringe on other residents' rights? {IDAPA 16.03.22.225}		
2. Does the facility <b>evaluate</b> behaviors to include the following questions: a. Is the behavior transitory or permanent? b. What are the resident's previous behaviors or activities? c. Are you collecting baseline data that includes the intensity, duration and frequency of the behavior? d. Has the resident had any recent life changes, such as a death in the family? e. Has there been a change in the resident's daily routine? f. Plus, has there been a change in the NSA? g. What environmental factors (such as heat, cold, noise) may have contributed to the resident's behavior? h. Is there any change in the physical health (such as illness or injury) of the resident? i. What events are triggering the behaviors? {IDAPA 16.03.22.225.01}		

Specific Criteria	Yes	No
3. Is the facility developing <b>interventions</b> for each specific behavior? Plus, are: <ul style="list-style-type: none"> <li>a. All staff aware of and do they consistently implement each behavioral intervention?</li> <li>b. Interventions least restrictive?</li> <li>c. Interventions reviewed within 72 hours of implementation, and from then on as appropriate?</li> <li>d. The reviews evaluating the continued need for the intervention? {IDAPA 16.03.22.225.02}</li> </ul>		
4. Are medications used to treat behavioral symptoms evaluated every 6 months to determine if the medications continue to be necessary and are at the lowest possible dose? {IDAPA 16.03.22.225.03}		
<b>Record Keeping or Documentation: IDAPA 16.03.22.711.01</b> 1. Does the administrator assure the facility's behavior management records meet the requirements in Sections 225 and 320.02.i of the rules? {IDAPA 16.03.22.711.01}		
2. Does the facility's behavior management records include the following: <ul style="list-style-type: none"> <li>a. The date and time the behavior was observed?</li> <li>b. What interventions were used?</li> <li>c. The effectiveness of the interventions? {IDAPA 16.03.22.711.01}</li> </ul>		

**The check lists can be used as a quality improvement tool and are offered as a helpful guide.**  
**They do not take the place of the rule requirements.**  
**It is highly recommended that the check lists be used in conjunction with the rules themselves.**